CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.		
1. KEVIN PARLINA	, hereby request station time as follows:	
	,as follows.	
IDENTIFY CANDIDATE TYPE	PERAL CANDIDATE	
	TE OR LOCAL CANDIDATE	
ALL QUESTIONS/BLOC	KS MUST BE COMPLETED	
Candidate name:		
SEVIN NARLINOS		
Authorized committee:		
Agongyroguestics time (l		
Agency requesting time (and contact information):		
N/A		
Candidate's political party:		
Office sought (no acronyms or abbreviations)!		
Red II love (or 5 Mg	in X	
Date of election:	General Primary	
May 10 frimary	rimary	
Treasurer of candidate's authorized committee:		
TAIN CARINA/ BEVIN A JAREINO		
The undersigned represents that:		
(1) the payment for the broadcast time requested has been furnished by (check one box below):		
the candidate listed above who is a legally qualified candidate, or		
the authorized committee of the legally qualified candidate listed above;		
(2) this station is authorized to announce the time as paid for by such person or entity; and		
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).		
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.		
	,	
Candidate/Committee/Agency	Station Representative	
Signature:	Signature:	
Mun Michigan		
Name: KEVIN JARVINO	Name:	
Date of Request to Purchase Ad Time: 41-212	Date of Station Agreement & C. II Town	
7-NAO	Date of Station Agreement to Sell Time: 4/30/22	

for a duration of at least four seconds at the candidate approved the broadcast	the broadcast matter to be aired pursuant to, (2) contains a clearly identifiable photogra and a simultaneously displayed printed statt and that the candidate and/or the candidate ntains a personal audio statement by the candidate has approved the broadcast.	ph or similar image of the candidate tement identifying the candidate, that
Candidate/Authorized Committee	e/Agency	
Signature:		
Name:		
Date:		
T	O BE COMPLETED BY STATION C	DNLY ,
Ad submitted to Station?	es No Date ad received	4/20/22
Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).		
Federal candidate certification signed (a	above): Yes No	N/A
Rejected – provide reason:	romptly upload updated final form when co	
Contract #: 3162-2	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:
ourchased or attach separately. If station	raffic system print-out) or other documents time purchased, when spots actually aired, will not upload the actual times spots aired t information immediately should be placed	the rates charged and the classes of time

Hometown Family Radio P.O. Box 5853 Grand Island, NE 68802 308-381-1430

Order #:

3162-00002

Description:

May 10 Campaign Run

Date Entered:

4/20/2022

P.O.#:

Salesperson:

Invoice Frequency: Billed at end of Cal Month, Sorted by Date

Phone/Fax:

308-340-1501

Stevens, Jesse

Kevin Darling for Red Willow County Sheriff Attn: Kevin Darling 806 West 10th McCook, NE 69001

On-Air Schedule

Start Date 5/2/2022

End Date 5/9/2022

<u>Station</u> KIOD-FM

Scheduled Time/Event 06:00:00 to 19:00:00

Repeated Weekly

Length :30

Qty 50 Rate 7.00

<u>Total</u> 350.00

 \underline{W} \underline{Th} \underline{F} <u>Sa</u> 7 5 7

Order Start Date: 5/2/2022

Order End Date: 5/9/2022

Spots: 50

Total Charges:

\$350.00

Projected Calendar Month Billing Totals for Kevin Darling for Red Willow County Sheriff / 3162-00002:

May

2022

Spot Count

50

<u>Net Billing</u> \$350.00

Confirmed & Accepted for Hometown Family Radio By:

Accepted for Kevin Darling for Red Willow County Sheriff By:

Please Sign and Return One Copy